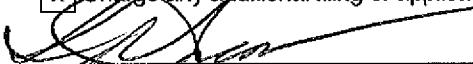


<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. 0471-0286PUS1																																											
Application No. 10/501,030-Conf. #3120	Filing Date August 12, 2004	Examiner M. C. Henry	Art Unit 1623																																												
Applicant(s): Norbert E FUSENIG et al.																																															
Invention: BIOMATERIALS BASED ON HYALURONIC ACID FOR THE ANTI-ANGIOGENIC THERAPY IN THE TREATMENT OF TUMORS																																															
<b>MS Amendment</b> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450																																															
Transmitted herewith is an amendment in the above-identified application.																																															
The fee has been calculated and is transmitted as shown below.																																															
<table border="1"> <thead> <tr> <th colspan="6">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th>Claims Remaining After Amendment</th> <th>Highest Number Previously Paid</th> <th>Number Extra Claims Present</th> <th>Rate</th> <th></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>11</td> <td>- 35 =</td> <td>0</td> <td>X 52.00</td> <td>0.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>- 3 =</td> <td>0</td> <td>X 220.00</td> <td>0.00</td> </tr> <tr> <td colspan="6">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> </tr> <tr> <td colspan="6">Other fee (please specify):</td> </tr> <tr> <td colspan="6"><b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00</td> </tr> </tbody> </table>						CLAIMS AS AMENDED							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	11	- 35 =	0	X 52.00	0.00	Independent Claims	3	- 3 =	0	X 220.00	0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00					
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<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b> 0.00																																															
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity																																												
<input type="checkbox"/> No additional fee is required for this amendment.																																															
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.																																															
<input type="checkbox"/> A check in the amount of \$ _____ is enclosed.																																															
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																															
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.																																															
<input checked="" type="checkbox"/> Credit any overpayment.																																															
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																															
 Leonard R. Svensson Attorney Reg. No.: 30,330																																															
Dated: June 8, 2010																																															
BIRCH, STEWART, KOLASCH & BIRCH, LLP 12770 High Bluff Drive Suite 260 San Diego, California 92130 (858) 792-8855																																															